Tuberculosis: Quick Facts for Physicians



The Alabama Department of Public Health is conducting an intense screening and contact investigation in Marion, Perry County, Alabama, due to **26 total cases of tuberculosis** (TB) disease reported to be linked to Perry County since 2014. Three adult deaths have been linked to Perry County. Four children have been treated for tuberculosis disease, are alive, and are doing well. Public health is trying to identify persons with latent tuberculosis infection (LTBI) who can benefit from preventive therapy as well as identify any new cases of TB disease.

Since 2014, 15 patients linked to Marion, Perry County, Alabama, have **successfully completed therapy for TB disease.** Nine patients (including one new patient identified as part of screening) are currently on TB therapy and have been rendered non infectious.

Three new cases of tuberculosis disease

have been found during screening. Two cases were adults and one case was a person less than 15 years of age. These patients are all tolerating medication and are doing well. All three of these patients live in Marion, Perry County.

From January 8 through February 10, at least 2,150 patients have been tested with **interferon gamma release assay (IGRA) or PPD.** IGRA is the preferred method of screening in patients, age 2 years and older. One hundred fifty-one persons have been identified as positive for IGRA or PPD so far. Most of these patients have already received a CXR, evaluation, and appointments to start preventive therapy at no charge.

General signs and symptoms of TB

include cough of more than two weeks' duration, shortness of breath, fever, night sweats, weight loss and fatigue. In addition, co-morbidities such as HIV, alcohol or substance abuse, and diabetes may warrant including TB in the differential diagnosis. Children with TB, especially those less than 5 years of age, may not present with classic pulmonary symptoms and may have lethargy and failure to thrive including poor developmental milestones and failure to gain weight.

Environmental factors that promote efficient transmission of tuberculosis include small, closed spaces, shared air with poor ventilation, length of time of exposure, and frequency of exposure. Infection control measures outlined by expert bodies such as APIC and CDC should be followed to reduce transmission of TB in medical settings.

Patients with LTBI cannot spread TB to

others. LTBI patients have no symptoms or physical findings of TB. These patients have a positive IGRA or TB skin test and a normal CXR. LTBI patients benefit from preventive regimens administered at no charge by public health including short, directly observed preventive regimens to improve compliance.

Expert consultation from infectious disease physicians and physicians experienced in TB control and prevention can be arranged through the Alabama Department of Public Health, Division of TB Control, 334-206-5330 or after hours at 1-800-338-8374.

Useful Resources: www.cdc.gov/tb, https://sntc.medicine.ufl.edu, www.emedicine.medscape.com/article/230802-overview